

# Fireworks Refund Request/Written Notice of Cancellation

Michigan Department of Licensing & Regulatory Affairs  
Bureau of Fire Services  
PO BOX 30700  
Lansing, MI 48909  
Phone: (517) 241-8847 Fax: (517) 332-1427  
Email: [Fireworks@michigan.gov](mailto:Fireworks@michigan.gov)

**REQUIRED:**

SECTION I, II AND III OF THIS FORM IS TO BE COMPLETED BY THE CERTIFICATE HOLDER  
IN ORDER TO BE CONSIDERED FOR REFUND. IF THE FORM IS NOT COMPLETED, IT WILL BE RETURNED TO YOU.

**SECTION I**

Name Fireworks Certificate Holder		Certificate No: (limit 1 per form)	
Retail Sales Address (include street address, city, state, zip):			
Refund Address (include street address, city, state, zip):			
E-mail Address:		Phone Number:	

PLEASE EXPLAIN REASON FOR REFUND.

**SECTION II**

Reason for refund (if additional space is needed, please provide as an attachment):	
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**SECTION III**

Signature of Certificate Holder:	Date of Signature:
Printed Name of Signor (Certificate Holder):	

**FOR BUREAU USE ONLY**

Site Inspection	<input type="checkbox"/> Check or Money Order	<input type="checkbox"/> Credit Card
<input type="checkbox"/> YES	Refund Amt \$	Refund Amount \$:
<input type="checkbox"/> NO	Voucher#	Tran ID#:
Staff Initials Verification:	Date Cert Issued:	Cert Amt PD:
		Receipt #:
	Date Entered in C3	Date Cert Issued:
Authorized Manager Signature/Date (State Fire Marshal/Assistant State Fire Marshal)		Cert Amt PD:
		Request sent to CEPAS :

## INFORMATION AND INSTRUCTIONS

1. An applicant may be eligible for a refund of a portion of the application fee if you meet the following conditions:
  - a. Submit Fireworks Refund Request/Written Notice of Cancellation Form.
  - b. The applicant must complete the form; Sections I, II, and III.
  - c. The applicant **must sign the form** acknowledging the fireworks certificate is void and no longer valid for sales.

Pursuant to R 29.2907 Refunds:

R 7. An applicant shall be eligible for a refund of 80% of the application fee if a written notice of cancellation for a certificate is received by the Bureau **prior** to the completion of the site inspection. The notice shall be signed by the applicant and state that the applicant acknowledges that the certificate, if already issued, is void. History: 2013 MR 5, Eff. March 4, 2013.

### 2. SECTION I

- a. Enter the name of the fireworks certificate holder (name of applicant on fireworks application).
- b. Enter the fireworks certificate number (limit: only one certificate number can be entered per form).
- c. Enter the retail sales location for the certificate number.
- d. Enter the address to send refund to.
- e. Enter a valid e-mail address.
- f. Enter a valid phone number.

### 3. SECTION II

- a. Please explain the reason for refund, if you need additional space you may provide an attachment (please note see attachment).

### 4. SECTION III

- a. Signature of Certificate holder (required to be considered for refund).
- b. Date document was signed.
- c. Print the name of the signor (which should be the certificate holder).

5. You may submit your request for refund via U.S. Postal mail, e-mail or by facsimile:

**U.S. Postal Mail:**

Michigan Department of Licensing & Regulatory Affairs  
Bureau of Fire Services  
Fireworks Refund Request/Written Notice of Cancellation  
PO BOX 30700  
Lansing, MI 48909

**E-mail:**

**FIREWORKS@MICHIGAN.GOV**

**Facsimile:**

**(517) 332-1427 or (517) 332-1428**